## Wisconsin Medicaid Maximum Allowable Fee Schedule for Community Support Program Services

Wisconsin Medicaid-certified providers will be reimbursed the rates listed on this schedule for covered services provided to eligible recipients.

This maximum allowable fee schedule contains the following information:

**Procedure Code**The procedure code recognized by Wisconsin Medicaid to identify the

service provided.

**Description** An abbreviated description of the procedure code.

Contracted Rate The uniform rate determined by the Division of Health Care Financing

(DHCF).

**Reimbursement (federal share)** The federal share of the contracted rate. This is the amount paid per

unit by Wisconsin Medicaid.

The fee schedule does not address the various coverage limitations routinely applied by Wisconsin Medicaid before final payment is determined (e.g., recipient and provider eligibility, billing instructions, frequency of services, third-party liability, copayment, age restrictions, and prior authorization).

Community Support Services are not covered under the BadgerCare Plus Benchmark Plan.

The preceding information is intended to help providers understand the Wisconsin Medicaid fee schedule. For questions about the fee schedule, providers should contact Provider Services at (800) 947-9627. For questions about rates, providers should contact the DHCF by writing to the following address:

Policy Analyst Division of Health Care Financing Crisis Intervention Services PO Box 309 Madison WI 53701-0309

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Procedure Code	Procedure Code Description	Modifier and Modifier Description	Contracted Rate*	Reimbursement (Federal Share) Paid Through 9/30/07	Reimbursement (Federal Share) Paid on and After 10/1/07
H0039	Assertive community treatment, face-to-face, per 15 minutes	<b>UA</b> — Psychiatrist	\$37.51	\$21.56	\$21.61
		UB — Advanced Practice Nurse Prescriber with mental health specialty	\$37.51	\$21.56	\$21.61
		HP — Doctoral level	\$28.14	\$16.17	\$16.21
		HO — Masters degree level	\$22.51	\$12.94	\$12.97
		HN — Bachelors degree level	\$15.00	\$8.62	\$8.64
		HM — Less than Bachelor degree level	\$5.63	\$3.24	\$3.24
		U4 — Group MD/Advanced Practice Nurse Prescriber with mental health specialty	\$9.38	\$5.39	\$5.40
		U3 — Group, Ph.D.	\$7.03	\$4.04	\$4.05
		U2 — Group, Masters	\$5.63	\$3.24	\$3.24
		U1 — Group, Professional	\$3.75	\$2.16	\$2.16

<sup>\*</sup> Contracted rates are effective for dates of service on and after October 1, 2003.